

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 31, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000103511

1. Entity Name
MICHAEL PERREAULT LLC



Principal Place of Business
65 SOUTH DIXIE HWY
ST AUGUSTINE, FL 32095

Mailing Address
65 SOUTH DIXIE HWY
ST AUGUSTINE, FL 32095



03262008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

PERREAULT, MICHAEL
65 SOUTH DIXIE HWY
ST AUGUSTINE, FL 32095

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000876035
04/11/08-80057-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME PERREAULT, MICHAEL
STREET ADDRESS 65 SOUTH DIXIE HWY
CITY-ST-ZIP ST AUGUSTINE, FL 32095

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE: MICHAEL A. PERREAULT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/27/08 904-501-1962

Date

Daytime Phone #